									Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECOF											_		
Effective October 1, 2003										100	9	6.8	57
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	. E!	YTITY	OR	OTHER SMALL	
TOTAL CLAIMS			25			-		RATE	=	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	ΈE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			2 5 minus 20=		• 5			X\$ 9=			OR	X\$18=	90
INDEPENDENT CLAIMS			5 minus 3 = *			0		X43= ·			OR	X86=	172
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT					+145:	=		OR	+290=	170
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				1	TOTA	L		OR	TOTAL	1032
CLAIMS AS AMENDED @ART II											J	OTHER	+
		(Column 1)		(Column 2)				SMALL EN		NTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	·	PAID	BER OUSLY	PRESENT EXTRA		RATE	:	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 25	Minus	##		=		·X\$ 9=	.		OR	X\$18=	
	Independent	• 5	Minus	***		=		X43=	7		OR	X86=	
	FIRST PRESE	NTATION OF M	JLTIPLE DE	PENDENT	CLAIM			.145				+290=	
1,1718			1022					+145=	i		OR	TOTAL	
	(, ((Caluma 2) (Caluma 2)				•	ADDIT. FEEOR ADDIT. FEE					
		(Column 1) CLAIMS		(Colun	EST	(Column 3)	lr	_	7	ADDI-	1		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVICE PAID	USLY	PRESENT EXTRA		RATE		TIONAL		RATE	TIONAL
	Total	•	Minus	**		=		X\$ 9=			OR	X\$18=	
	Independent	•	Minus	<u> </u>		=		X43=	1		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							.445	7			.000	
		•					L	+145= TOTA			OR	+290= TOTAL	
									ĒL	-	OR	ADDIT. FEE	
	`	(Column 1) CLAIMS		(Colum		(Column 3)	r		_	4001			4551
AMENDMENT C		REMAINING AFTER AMENDMENT	·	PREVIO PAID F	USLY	PRESENT EXTRA		RATE	-	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	,	=		X\$ 9=			OR	X\$18=	
	Independent	•	Minus	***		=		X43=	†		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								\dagger				
+145= • If the ntry in column 1 is less than the entry in column 2, write "0" in column 3.											OR	+290=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR ,	TOTAL ADDIT. FEE	\	
		ber Previously Paid					r four	nd in the a	appr	opriate box	in cot	umn 1.	